Special Event Parade Questionnaire Attachment D

Licensing Office 55 North Center Street Mailing Address: PO Box 1466 Mesa, Arizona 85211-1466 480-644-2316 Telephone 480-644-3999 Fax www.cityofmesa.org



PARADE QUESTIONNAIRE 1. Date of parade_____ 2. Start time of parade Completion time of parade 3. Location of proposed assembly area_____ Assembly start time 4. Have arrangements been made for traffic control (barricading and/or police officers) ☐ Yes ☐ No If yes, please explain_____ If no, when will these arrangements be made?_____ 5. Attach map of parade route 6. Indicate the starting point, proposed travel route and the termination point. 7. During the event will you occupy all or a portion of the streets? 8. Approximate number of persons, animals and vehicles, which will constitute the event. Number of people_____ Number of animals_____Type of animals_____ Number of vehicles_____Type of vehicles____ ☐ Yes ☐ No 9. Have arrangements been made for emergency medical personnel? If no, when do you expect the arrangements to be completed?_____ 10. Other pertinent information

NOTE: If street closures and/or police officers are needed on parade route, see Attachment F.

Signature of Applicant

Date